PUBLIC ANNEX C

What happens when child soldiers grow up? The Mozambique case study

Neil Boothby

This article offers findings on the first longitudinal study of life outcomes for former child soldiers. Between 1988 and 2004, information was prospectively collected on 39 male former child soldiers in Mozambique. The data show that, after 16 years, the vast majority of this group of former child soldiers have become productive, capable and caring adults. At the same time, none of them are truly free from their pasts. They all struggle with psychological distress connected to their experiences as child soldiers, and rely solely on themselves, families and friends for comfort and support when they get in psychological trouble. The study also identified specific interventions that were important to enable these former child soldiers a substantial recovery and reintegration. Apprenticeships, as well as community sensitization campaigns, community works projects and outward support of traditional community rites were some of the most important activities related to the successful recovery of many of the former child soldiers.

Keywords: child soldiers, community sensitization, coping, Mozambique, reintegration, trauma

Introduction

Every day it is estimated that some 5000 children are newly displaced due to conflict somewhere in the world (United Nations High Commissioner for Refugees, (UNHCR) 1999). Many may be able to flee the violence with their families, but an

increasing number become separated and are being recruited into armed groups as a result of erupting wars. Whether victims or perpetrators of violence, during conflict, children see the protective fabric around them collapse as homes are destroyed, families are uprooted, schools and health services are ransacked, and communities become consumed by violence.

Over the past decade, the number of child soldiers has increased. As small arms and light weight weapons become more available, children become more easily armed, and as conflicts continue to simmer in forgotten corners of the post-Cold War world (Machel, 2001). An estimated 300 000 boys and girls under the age of 18 years are currently participating in ongoing conflicts in Asia, Africa, Europe, the Americas, and the former Soviet Union.¹ The problems of children as soldiers has not gone unnoticed, and fortunately increased human rights attention to it has lead to new international legislation to protect under-aged children against armed recruitment.² The protection and welfare of child soldiers also is now being included in the international community's peace and security agenda through several Security Council resolutions.3 These resolutions have lead to a range of operational initiatives, including the deployment of child protection professionals in United Nations peacekeeping missions, and the earmarking of hundreds of millions of dollars from

government donors for child soldier prevention and rehabilitation programs. In light of these recent developments, it is important to learn more about how children are affected by their experiences as child soldiers, and what kinds of assistance enable their psychological recovery and social-economic reintegration over time.

This article offers findings on the first longitudinal study of life outcomes of former child soldiers (FCSs). Between 1988 and 2004, information was prospectively collected on 39 male former child soldiers in Mozambique. Our research began at the Lhanguene Rehabilitation Center in Maputo, continued after these boys were reintegrated back into families and communities, and culminated recently in 2004 with a study to discover how these 39 former child soldiers now fare as adults.⁴

Some journalistic accounts labelled this generation of Mozambique's children as a 'lost generation' and 'future barbarians.' Our research suggests this is not the case. Most have regained a foothold in the economic life of rural Mozambique, are perceived by their spouses to be 'good husbands', are taking active steps to ensure their own children's welfare, and are engaged in the collective affairs of their communities. Only a few continued in a life of violence, or are so disordered that they have been unable to take control of their lives.

At the same time, none of these former child soldiers are truly free from their pasts. All continue to struggle with psychological distress linked to their experiences as a child soldier. When troubling memories from the past reappear, these former child soldiers rely solely on themselves, their families and friends for comfort and support. Many have managed to reduce the frequency of post-traumatic distress by identifying situations that promote painful thoughts and feelings

from the past and avoid them. They try not to dwell on troubling memories when they do emerge; rather, they consciously think about more positive aspects of their lives, re-engage in day-to-day work activities, or seek solace in religious institutions, prayers, rituals, and texts. Wives, for the most part, are aware of their husbands' struggles. They tend to encourage their husbands not to become overwhelmed by thoughts and feelings, and compensate in other ways when they do become despondent. Extended family members, neighbours and community members also are aware of these tendencies, and typically respond with patience, advice or support.

Our research also identified specific interventions that were important to enable these former child soldiers a substantial recovery and reintegration. Activities that were identified as important were those that supported and strengthened individuals' coping skills for anticipated trauma and grief, as well as those that supported normative life cycle milestones (explained below). Additionally, activities that instilled a sense of social responsibility and promoted safe codes of conduct, self-regulation and security seeking behaviour were also helpful. Over and above all this, however, was the need of former child soldiers to be accepted by their families and communities after war.

Thus, apprenticeships, as well as community sensitization campaigns, community works projects and the outward support of traditional community rites were some of the most important activities related to the successful recovery of many of the former child soldiers.

The war in Mozambique

The armed conflict in Mozambique lasted for almost 30 years. In 1964, Frelimo (The Mozambique Liberation Front) launched

an armed insurgency for national liberation from the Portuguese colonists. Portugal bitterly resisted liberation efforts, but acquiesced after a 10-year war. In 1975, the minority regimes in South Africa and Rhodesia looked on in alarm when Mozambique declared itself an independent nation. Rhodesia, in particular, viewed this as a threat since it shared its eastern border with Mozambique and feared its' own indigenous population would also fight for independence (Vines, 1991). The Rhodesian secret police organized, trained, and armed anti-Frelimo groups and disgruntled ex-Frelimo soldiers into an organization called the Mozambique National Resistance (Renamo) (Hanlon, 1984). In 1977, after Mozambique gave sanctuary and support to guerrillas fighting the Rhodesian regime, Renamo infiltrated Mozambique to begin its own brutal guerrilla operations.

In 1980, Renamo lost its sponsorship in Rhodesia after the minority regime fell and the country became Zimbabwe. South Africa then intervened and offered its territory as a sanctuary and training ground. With South African support, Renamo returned to Mozambique and continued to wage a guerrilla campaign to undermine both the country's infrastructure and the government's ability to govern by destroying factories, schools, health clinics, and stores (Morgan, 1990).

The Children and War Programme

In 1988, Save the Children began its Children and War Programme in Mozambique. The programme's initial focus was on 39 boy soldiers (between 6 and 16 years of age), all of whom had had been abducted from their families by Renamo. They were trained to fight, and in many instances, encouraged to kill other human beings. Eventually, these

boys escaped or were liberated from rebel strongholds. After brief stays in prisoner of war camps, the government decided to place them in the Maputo Center and Save the Children was asked to provide psychological and social assistance.

Rehabilitation efforts at the Lhanguene Center focused on four inter-related components that were integrated into all centre activities: establishment of safety and appropriate codes of conduct, re-establishment of self-regulatory/impulse control processes, promotion of security versus survival-seeking behaviour, and support of active quests to derive existential 'meaning' from violent events. Additionally, a family tracing and reunification programme, community sensitization campaigns, traditional ceremonies, and apprenticeships were set up to assist the reintegration of these boys back into their own communities.

Methods

Any research done in a war-torn setting is difficult and fraught with practical and ethical constraints (Jensen, 1996). Such is the case here. The 39 boy soldiers who comprised this study were not randomly selected; rather, they were pulled from detention centres in southern Mozambique by the government to draw international attention to Renamo's abuse of children. Between 1989 and 1990, three members of our research team undertook a parallel study of 504 separated children (reported below). The results from this study reveal that the Lhanguene child soldiers' experiences were similar to those of other abducted children in Renamo base camps. Unfortunately, no girls, who were also abducted and forced to take on different roles with Renamo, were selected by the government to be in the Lhanguene Center.

When the Lhanguene Center opened in 1988, culturally sensitive assessments were

conducted to guide the rehabilitation and reintegration efforts. War related experiences (events, severity, and duration) were recorded using a Life Events Profile. Children's ecologies were assessed using a Documentation, Tracing, and Reunification (DTR) protocol.⁵ A Child Behaviour Inventory Form (CBI) was also established to assess aggression, traumatic symptoms, and high-risk to pro-social behaviour. Follow-up assessments were conducted in 1988, 1989 and 1990 in the boys' communities. A number of these visits were video taped.

For the 2003–2004 phase of our research, former Lhanguene staffled research teams and conducted interviews, as it was not possible to gain access into rural communities without the presence of these trusted individuals.

Between the initial phase of our study in 1988, and the most recent phase in 2003–2004, the Harvard Trauma Questionnaire (HTQ) had become a 'standard' in the literature on international trauma assessment. We found that many items from one section of the HTQ matched a number of the items on the original CBI (Boothby, Sultan, & Upton, 1991) and were also mentioned by key informants in free listing exercises. Therefore, we adapted this section and called it the Trauma Symptoms Checklist (TSCL), for use in the 2003–2004 phase of our study.

We piloted the TSCL with key informants from the more accessible communities where the Lhanguene boys had been reintegrated. As a result of the pre-tests, several modifications were made, as many nuances in the English language variables proved redundant when translated into local languages. We also used free listing to identify relevant 'social functioning' tasks important to local people (Bolton & Tang, 2002). The aim was to ensure that our definition and measures

of adult social functioning matched local perceptions of Mozambican adult social functioning.

None of the former child soldiers declined to be interviewed, nor did any terminate the interview once it had started. If conversations digressed from the questionnaire forms, notes were taken on the back of the questionnaire. Additionally, if any outstanding physical or situational circumstance presented, a note was made.

To link the data to other sources of information, focus groups with families, community members, and community leaders were also conducted. Our overall aim was to gain as accurate a picture as possible of how the former child soldiers have adapted over time, paying particular attention to their psychosocial wellbeing, as well as their roles as husbands, fathers, economic providers and neighbours.

Children in war

The conflict in Mozambique had a devastating impact on children. Surveys during this time revealed that one third of Mozambique's children died before they reached the age of five years through starvation, malnutrition, and preventable illnesses that paralleled the continuing conflict (United Nations Children's Fund (UNICEF), 1987).

What happened to the children of Mozambique who did survive beyond the age of five? In an effort to answer this question, in 1989, members of our initial research team interviewed 504 children in 49 districts comprising seven of Mozambique's 10 provinces, thereby covering a broad geographical range from Maputo in the south to Nampula in the north.⁸ Mozambican nationals asked a randomly selected sample of 227 boys and 227 girls between the ages of 6 and 15 years to describe their war-related experiences in detail.

The results are staggering and listed below.

- 77% had witnessed murder, often in large
- 88% had witnessed physical abuse and/or torture
- 51% had been physically abused or tortured
- 63% had witnessed rape and/or sexual abuse
- 64% had been abducted from their families
- 75% of the abducted children were forced to serve as porters or human cargo carriers
- 28% of the abducted children (all boys) were trained for combat

In addition to the above statistics, children's descriptive accounts provided considerable insight into how Renamo socialized children into violence. Adults relied on physical abuse and humiliation as the main tools of indoctrination. In the first phase of indoctrination, Renamo members attempted to harden the children emotionally by punishing anyone who offered help or displayed feelings for others, thus conditioning them not to question the group's authority. Children were then encouraged to become abusers themselves. A progressive series of tasks - taking the gun apart and putting it back together, shooting rifles next to their ears to get use to the sound, killing cows - culminated in requests to kill unarmed human beings. Children were expected to assist adult soldiers without question, or emotion. Those that resisted were often killed. Those that did well became junior 'chiefs' or garnered other rewards such as extra food or more comfortable housing. Upon reaching the final stages of training, normally after their first murder, Renamo marked the occasion ceremonies that resembled traditional rites of passage. This process of mimicking traditional ceremonies appeared to be aimed at usurping children's ties to their families, communities, and the traditional ideas of right and wrong. As one 15 year-old boy put it; 'I was changed in that base camp. Even if I could have escaped, I never would have gone home again. Not after what I had seen and done'.

The Lhanguene boys

The Lhanguene boys'child combatant experiences were similar to those reported by other abducted boys. The length of time spent in base camps ranged from two months to three years, and their functional roles varied from spies, to cooks, cleaners, porters, combatants and leaders of combatants. Their survival depended on the Renamo leaders who were impulsive, unpredictable, suspicious, and quick to react to the slightest provocation. According to the boys, drugs and alcohol were a regular staple of life, thereby adding to the unpredictability of life in base camps.

One of the most striking initial observations at the Lhanguene Center was the range of behaviours the boys exhibited when they first arrived. Some appeared listless and numbed and unable or unwilling to talk, or engage in organized activities. Others were talkative, anxious, and active. A number of younger boys interacted with adult caretakers; many of the older boys avoided contact or communication with others altogether. Some did not interact with peers; others engaged openly with one another, a few older boys bullied younger ones, and some engaged in fights and other high-risk behaviour.

Mozambican volunteer caretakers recorded their observations of the boys' behaviour while they were at the Lhanguene Center. The following synthesizes one volunteer's observations during the first three months at the Center:

We [the caretakers] were frightened of the boys, too. None of us wanted to work with them

at first. We thought they were going to hurt us. But day-by-day, each side began to get to know the other better. After about a month, the situation improved. I think the boys realized that we were different than Renamo. I guess we realized they weren't going to hurt us either. After a while, we just started treating them like our own children. We joked with them, watched their football games, encouraged them to do their homework, made the younger ones sit in our lap. It was difficult because some of them insulted us at first, and argued when they did not get what they wanted'.

Save the Children programme staff used the CBI protocol to record observations of the boys' behaviour at the Center at one and three month time intervals. These observations roughly parallel the descriptive account provided above (see Table 1).

Considerable 'normalization' of individuals' behaviour took place during the initial three months of intervention at the Lhanguene Center. Some programme staff reported that overall, aggressive behaviours subsided and pro-social behaviours increased as the boys became more comfortable with, and attached to, their adult caretakers.

The length of time spent with Renamo was an important factor related to these

boys' adjustments at the Center. In general, boys who spent six months or less as a child soldier (72%) appeared to emerge with their basic trust in human beings and social values more or less intact. Although all of these boys had been exposed to severe trauma, and some had also participated in abuse and violence, they described themselves 'victims' rather than 'members' of Renamo. A different picture emerged for boys who spent one year or longer as child soldiers (28%). This group continued to exhibit disobedient and uncooperative behaviours during the first three months at the Center. Despite their ability to articulate the belief that violence was 'wrong', these boys continued to use aggression as a principal means of exerting control and social influence. Their self-image also appeared to be bound up with the persona of their captors. They rarely described themselves as 'victims'; rather, they tended to identify themselves as 'members' of Renamo.

- 'I could have escaped but didn't because I had a good position'.
- I was a leader and others respected me?
- I first served as his (a base camp leader) personal servant. Then he made mechief of a group of other boys. I had power?

Table 1. Observations of behaviour

Behaviour Sometimes/frequently	1st month	3 rd month
Aggressive with other children	56%	17%
Aggressive with adults	34%	9%
Withdrawn	44%	29%
Disobedient	66%	27%
Lying	32%	15%
Sexually provocative	7%	2%
Playfully engages in structured activities	7%	41%
Obeys rules	46%	90%
Cooperates with other children	27%	76%
Cooperates with adults	29%	83%

• 'They used to follow my orders. Now (at the Lhanguene Center) they don't.'

Traumatic symptoms over time

All of the boys experienced recurrent thoughts or memories of traumatic events while at the Lhanguene Center, and all continue to 16 years later. While other symptoms also persist, the number of former child soldiers experiencing them as adults is considerably less than those who experienced them as children. Six common elements in the 1988 and 2003 assessments, and their occurrence are listed below (see Table 2).

To date, we have identified two variables that are linked to decreases in post-traumatic stress symptoms over time: (1) the individual's use of cognitive strategies and avoidance to manage their symptoms, and (2) duration of time as a child soldier. As shown above, five

symptoms decreased in frequency over time while one, avoidance activities, increased over the course of the past 16 years. This rise in avoidance activities, when further probed in interviews proved to be adaptive, as these former child soldiers were actively managing their symptoms more consciously and effectively. Moreover, those who reported using avoidance as a coping mechanism scored lower on the TSCL (i.e. have fewer symptoms) than those that do not employ these same strategies.

Avoidance, as described by the former child soldiers, included actively identifying social situations, physical locations, or activities that had triggered the emergence of post-traumatic stress symptoms in the past, and making efforts to avoid them in the future. One of the strongest traumatic re-experience triggers was physical location. Some former child

Table 2. Traumatic symptoms

Percentage of FCSs that responded either 'sometimes' or 'frequently'

Question	Lhanguene CBI 1988	TSCL 2003
Recurrent thoughts or memories of the	100%	100%
most hurtful or traumatic events		
Feeling as though the traumatic event(s)	63%	45%
is happening again		
Recurrent nightmares	52%	36%
Sudden emotional or physical reaction when	48%	36%
reminded of the most hurtful or		
traumatic moments		
Inability to remember parts of the	61%	45%
most hurtful or traumatic events		
Avoidance of activities that remind	35%	63%
you of the most hurtful or		
traumatic events		

soldiers are now avoiding places where they witnessed or participated in violent and inhumane events.

For example, for one former child soldier, it was a large tree in his village where Renamo thugs killed his father and abducted him. For another, it was a village footpath where, as a 12 year-old boy, he came across a row of decapitated heads impaled on poles. Four former child soldiers cited social drinking with other male companions as a trigger as boisterous drinking rekindled memories of rowdy, drug and alcohol induced Renamo base camp experiences. All four of these former child soldiers now actively avoid social drinking. Two young men reported that they no longer slaughter animals because this routine chore 'reminds me of the war.' Their wives now assume this function. Several found they could no longer use machetes or other farming tools, as they had been used as instruments of torture and death during Renamo's reign of terror.

Moreover, the severity of post-traumatic stress symptoms is reduced by conscious efforts to not dwell on troubling thoughts and feelings when they emerge. Former child soldiers with lower TSCL scores described a kind of cognitive 'change of menu' strategy to ward off painful thoughts and memories that are listed below.

- 'Thinking about what I did in the war is wasting time because it [the war] helped nothing.'
- When I start to think about the war, I go to church and read the bible. I keep reading until the bad thoughts disappear?
- Itry to think about the present and the future, not the past?
- 'When bad thoughts enter my mind, I replace them as quickly as possible with better ones.
- I think about my children or my wife?

Conversely, former child soldiers with higher TSCL scores do not actively use avoidance

or employ other identifiable cognitive coping strategies. Instead, when confronted with painful memories, they tend to become consumed by them, often withdrawing from daily activities and routines. The following comments are indicative of these less adaptive tendencies.

(Wife): 'Sometimes he is fine and sometimes he is not. I can tell when things are bad for him because he stops working and spends time alone. Sometimes he tells me about what's bothering him, but most of the time he does not. I try to do my best to help him forget, like doing more work and selling things (normally the husband's responsibility) so when he returns from his bad thoughts things will be in order. Eventually, he goes to work, forgets and gets better'.

(Mother): 'He will suddenly get irritated and then very quiet. He'll go into the house and refuse to leave. We all know that his mind is back in the past. I tell everyone that we must be patient with him, but sometimes this is difficult. We all know he has suffered. We talk to him about the war, how it is over, and how he must also get over it. We try to do this with a good attitude and patience. Sometimes he threatens us when we talk to him this way, but so far nothing bad has happened. We will continue to live as we have and accept him as part of the family. He can change, it is just a matter of perseverance'.

As noted above, former child soldiers who spent six months or less as a child soldier exhibited less severe symptoms and behavioural problems at the Lhanguene Center than those who spent one year or longer with the guerrilla group. This trend continues into adulthood. Adults who spent six months or less as a child soldier scored lower on the TSCL than those that spent one year or longer. Moreover, the three former child soldiers who continue to suffer significantly as young men were with the Renamo for two years or longer.

While all of these former child soldiers continue to experience post-traumatic stress symptoms, only three of them suffered significantly impaired social functioning. These three were not able to curb their violent behaviour or live peacefully among others in their communities. All three of these former child soldiers were deemed to be 'troubled children' while at the centre and had been a child soldier for two years or longer. Two were youth leaders and one was only 6 years old when abducted.

Returning home

All of the Lhanguene boys were reunited with relatives (parents, grandparents, aunts, uncles, or older siblings). Assessment reports and videotapes of initial reunifications reveal both overt and reserved joy and excitement, as well as tears and words of sorrow over time spent apart. Subsequent family follow-up visits in 1989 and 1990 found that all of the Lhanguene boys continued to be well received by their relatives. Only one boy required an alternative placement. The following comments from 1988 to 1989 are indicative of how these boys viewed family acceptance a year after their reunifications.

- I was well treated; no one ever said anything bad about my participation in the war?
- I was well received by my family, they made me part of the family and they shared their food with me?
- 'They were glad to see me because they knew that I had suffered.
- 'They paid lots of attention to me.'
- I was well received, they made a traditional ceremony of welcoming to inform and thank the ancestors for protecting me?

No negative comments regarding family reunification were recorded at that time.

In 1989 and in 1990, all of these former child soldiers also reported feeling accepted by their communities with only two exceptions. One boy reported that the community was not happy with his return and accused him of having killed their relatives. A second boy described how his lack of money led to a poor reception by his community, as he had nothing to offer anyone when they asked for help. All other boys reported that they were received without problems or discrimination.

- I have been well received by the community?
- People came to speak with me and welcome me?
- 'They received me well because the government brought me and they respected me'.
- 'The community treated me well, they even sacrificed a hen to commemorate my return and inform
 the spirits of my arrival'.

Our 2003 – 2004 follow-up research employed a feeling of acceptance scale to gauge these former child soldiers' perceptions of community acceptance today. The overwhelming majority reported that as adults they feel respected by their neighbours, that their families care for them very much, and that their friends lookout for them.

- I can rely on my friends?
- 'When I need something, I ask my neighbours and friends, and if they can help me, they will'.
- If I die tomorrow, I think that people would miss
- Members of my community rely on me and I rely on them. It is how we live here?

All of the Lhanguene boys went through traditional ceremonies upon their return to their home villages. The traditional ceremonies afforded individuals a chance to be 'cleansed' from their acts during the war, as well as provided 'protection' for the community from ancestral rebuke that may have been brought on because of what the child had done (Chicuecue, 1997).

In our 2003–2004 interviews, most former child soldiers stated that these ceremonies helped them return to civilian life as they dealt with many of the issues these children faced during their initial reintegration. The traditional ceremonies helped repair social ills, cleansing those that came home 'contaminated' from the atrocities of war, and resolving social conflict in cases where normal social roles had been perverted. Not only were these ceremonies important for the former child soldiers as individuals, but they were also were reported to be vital for rebuilding community trust and cohesion.

Also, traditional ceremonies reportedly endow those returning from war with the ability to 'forget' their experiences and begin a normal life again.

- 'Yes, it was helpful because today I am leading a normal life'.
- 'There is a definite difference between before and after the ceremony.'
- 'The war memories never came back after the ritual'
- Before there was something missing in my body and in my life, but after, I am OK. I came back to normal life and now I feel like the others?
- It was helpful because it removed the evil that I
 was bringing with me. I was able to forget easily
 all the evils that I had, even though I still dream
 about it?

While former child soldiers used the term'forgetting' to describe the benefits of traditional ceremonies, subsequent discussions revealed that they were referring to the shame associated with their war-related experiences rather than the actual experiences per se. 'Forgetting', in this case, was in reference to vary-

ing degrees of absolution of painful stigma associated with their participation in the war. Many reported that this internal transformation helped them to become 'just like everyone else'.

Family members and neighbours also reported that the traditional ceremonies were important because they gave the community a form of 'defence' or 'protection' against problems that returning child soldiers could bring with them. During the war, children were forced to violate social hierarchies, sometimes killing elders and commanding their peers in battle. The righting of these wrongs, and the re-establishment of social hierarchies with deceased ancestors was a priority. While social stigma based on one's participation in the war appeared to be minimal, family and community members were still concerned that the Lhanguene boys might be disruptive due to their previous indoctrination into violent behaviour. To be sure, communities fulfil an important role in the reintegration of former child soldiers, as it is within the community that all social issues relating to the individual returnee are resolved. As traditional ceremonies are local beliefs put into practice, they facilitated the re-alignment of individual, family and communal relationships.

Community sensitization campaigns have also had a positive impact on community acceptance of former child soldiers. Sensitization campaigns were designed to enable community members to understand that former child soldiers were victims too, even though they may have perpetrated violence against that very community. Local military, police, teachers, and community leaders were targeted and encouraged to support the reintegration of former child soldiers by taking collective responsibility for the fate of the returnees. Community projects, such as reparation of hospitals, water systems

and other needs identified by community members, were initiated in these communities as a way of supporting collective child welfare efforts. During the course of our 2003–2004 focus group discussions, community members reported that they remembered government officials coming and talking to them about the children returning and that it made an impact on them.

- I remember the government people coming to tell us that our sons were going to come home and that we should treat them like everyone else. That is what we have done?
- 'We listened to the advice of the people that came from Maputo. We have accepted these boys and they live with us now. There is no difference?'
- 'The big men came and told us what to expect from our boys. Now we eat what they eat, we live together. We are all the same?'
- 'They are our sons; what they did they were forced to do, so we cannot blame them for such bad things'.

Making up for lost time

A major facet of successful reintegration was the ability to return to a normal life and resume daily activities. Going to the fields and working to help one's family allowed respondents 'to leave behind the traumatic experiences'. They emphasized the need for everyone to 'be the same'. Most reported that their greatest wish in returning home was to 'be like everyone else'. Other research suggests that the main element of suffering of young men taken in by Renamo was being removed from their homes and having to suspend the pursuit of their life plans (Schafer, 2001). This theme was also repeatedly identified in our 2003-2004 interviews.

Additionally, boys reported that one of the most devastating legacies of their time as a child soldier was the years of lost economic opportunity that, in turn, made the key life cycle tasks of choosing a wife and building a family difficult. Many of these former child soldiers reported these challenges to be more problematic than the actual war experiences themselves.

- I had no problems choosing a wife but I have had problems because of a lack of money?
- Thad no resources; I had to begin everything from the beginning.
- 'Those who did not go to the war had the time to earn some money but I had nothing after the war'.
- "Ihad to go to the swamp and cut reeds" (one of the lowest form of work in rural Mozambique) to build my house."
- It is difficult because we had to search in many different places for a place to live. It took much longer to build my house and family?
- 'If I had not gone to war I could have made money, and I would be living nicely now, but I am not'.
- I think the war was evil. It delayed my life. I lost ten years'
- I would have gone to work in the mines in South Africa. This would have helped me, but I didn't have the opportunity?

To what extent has this group of former child soldiers overcome these obstacles and regained a foothold in the normative life cycle of rural Mozambique? Several indicators were employed to explore this question such as: household income, housing and food security, as well as their own sons and daughters' health and educational status.

Despite disruptions to their life trajectories, this group of former child soldiers is faring as well as, and often better than, national averages for these socio-economic and child welfare indicators. The national average for household ownership is 91.7%, which matches the average of the former child soldiers, 91%. While 100% of these former child soldiers are engaged in farming, 63% of them

also earn additional income from waged labour. The national average for off-farm activities of rural inhabitants in Mozambique is estimated at 38% (Amimo, Larson, Bittencourt & Graham, 2003). Unfortunately, Mozambique is in the midst of a serious food crisis in rural areas. General estimates suggest one third of the population is classified as chronically food insecure¹¹, mostly coming from the south and central regions of Mozambique where this study took place (World Food Programme (WFP), 2001). All of these former child soldiers and their families are affected by this crisis. Eighty percent reported that they are not always able to eat or provide their children with balanced meals. Nine out of 10 also said that the adults in their households have reduced portion sizes or skipped meals almost every month during the past year. Despite this food shortage, the weight and height of their children (under five years of age) is above the national average. All scored above the median using the World Health Organization/National Center for Health Statistics (WHO/NCHS) normalized referenced weight for height scale (WHO, 1994)

We also asked our Mozambican interviewers to provide general observations about the parenting styles of these former child soldiers. In light of socio-economic and cultural differences in parenting styles, and the risk of misinterpretation, this was a simple exercise in which the interviewers provided either a 'supportive' or a 'non-supportive rating' in those situations where parent-child interactions could be observed as they were taking place naturally. These generalized observations, while falling far short of addressing the complexities of parent-child relationships, indicated that former child soldiers were, in general, far more supportive and engaging in interactions with their children than they were harsh and punitive. Moreover, all of the former child soldiers who were parents (62%) spoke, often at length, about their desires for their children to experience a better childhood than they had had. Most, in turn, indicated that the schooling that they had been denied due to their experiences as a child soldier was the 'best way' to ensure a 'good future' for their children. Indeed, 75% of this group's school-aged daughters and sons were attending primary school, which is considerably above the national average of 52% (UNICEF, 1987).

Eighty percent of these former child soldiers were 'married' in 2003. The overwhelming majority of their spouses perceive them to be 'good husbands.' Wives concurred with the economic hardships in these areas of Mozambique, noting that jobs are scarce for everyone, and indicating that they appreciated their husbands' efforts to earn extra income.

- I am happy with my husband. Even though he was in the war, he is just like everyone else?
- 'My husband helps me with the children. When I
 ask for money, he gives it to me if he has any. He
 doesn't spend it on drinking like some other hus bands'
- 'He often looks for work. Usually, he does not find any, but when he does it helps us a lot'.
- 'I can't complain. I am fortunate'.
- 'He is a good man. He is kind to me and takes good care of our daughters.'

Individual welfare in Mozambique is linked to informal sector enterprise and collective help networks. The extended family normally provides a form of 'social security' to its members that follow longstanding patterns of personal and kinship relationships. Community support is also expected for significant life events such as childbirth, initiation ceremonies and weddings, for personal crises such as sickness and death,

and for external crises such as draught, flood, crop failure and war. Social harmony and responsibility are key attributes in rural communities where the outcome of many activities is a function of teamwork.

In 2003-2004 interviews, the majority of these former child soldiers were able to cite specific incidences when they provided money, food, or other forms of assistance to needy family members or neighbours. They also actively participate in community activities that centre on the church, the school, or community infrastructure and, in doing so, tend to be leaders of group activities rather than simply members. Additionally, the percentage of former child soldiers that voted in the national presidential election was higher than national averages in rural communities. When questioned about their leadership roles, many former child soldiers said that since the war they have made a concerted effort to fit into their communities by doing 'everything I can to help my family and community' in order to prove themselves worthy.

- 'If people ask for something, I try to give it them. It is important to help someone who is in need.'
- Itry to be good, and lend things to people when they need them. Itake part in community work because in this way everyone benefits?
- 'I want to feel like normal people, so I work hard to help others.'
- Ivisit friends, share things with them, and do the same things others do.
- 'The church tells me God wants me to help others and I believe this is true. When I do help someone, I feel good about myself. I am paying back others for the bad things I did with Renamo?
- I try to not refuse anything to anyone. Helping people helps me feel like I belong here. That I am important?

All of these former child soldiers spoke positively about their Lhanguene experiences,

and 12 of them cited these experiences as factors that contributed to their involvement with people in need and in broader community affairs. Spending time with responsive adults (role models) at the centre and learning specific life skills also were identified as factors that contributed to their current sense of social responsibility. Two former Lhanguene staff accompanied interview teams into these former child soldiers' villages, and both were received with hugs, tears and exclamations of disbelief: 'We can't believe that you remembered us after so long!' 'It is very important that you are here because it shows that you have not forgotten about us.' Where proximity allowed, Lhanguene boys were still actively involved in each other's lives.

Discussion

In the same way an oyster transforms a raw irritant into a valued pearl over time, so too have most of these former child soldiers emerged from violent childhoods to become trusted and productive adult members of their communities and nation. Their life stories suggest that human resiliency is too dynamic and complex to be conceptualized as merely the ability to 'ward-off' or 'bounce-back' from traumatic adversities. These young men's 'resiliency' involves active quests to derive existential 'meaning' from violent events, to be 'cleansed' from their pasts and 'forgiven' for their wrongdoings, to regain their 'true' identity by 'being like everyone else,' to find their place in community by helping others, and to 'manage' intrusive thoughts and reveries in ways that enable them to continue their day-to-day lives. Family and community acceptance and spiritual and religious beliefs and practices, so entwined with individual wellbeing in rural Mozambique, are the wellsprings of this resiliency.

The next phase of our research in Mozambique is to compare the adult outcomes of a similar group of child soldiers who, unlike the Lhanguene boys, were not provided with organized assistance. Until then, we are not in a position to comment on the efficacy of specifically organized interventions. Nonetheless, we do believe it useful to offer some preliminary findings based on these young men's observations, as well of those offered by their wives and neighbours.

Neither the Lhanguene Center interventions, nor the work of traditional healers and spiritualists, put an end to traumatic symptoms entirely. Indeed, is a 'cure' even possible in the aftermath of the severe and chronic experiences of a child soldier? While we are not in a position to answer that question, our findings do suggest that supporting and strengthening coping skills for anticipated trauma and grief responses are key intervention objectives. Moreover, in the absence of formal mental health or psychosocial support programs (the norm in most of today's war-affected countries), 'avoiding' situations and activities that remind former child soldiers of troubling experiences may be amongst the most adaptive coping skills they should be encouraged to employ.

A number of interventions aided these former child soldiers' transitions into society. Most of these young men described the time they spent with adult caretakers and other former child soldiers at the Lhanguene Center positively. Programme efforts to promote safe codes of conduct, self-regulation, and security-seeking behaviour appear to have engendered a sense of social responsibility among these former child soldiers that is still evident today. ¹²

Traditional cleansing ceremonies played key reconciliation roles. They helped to repair relationships with their families and communities to realign the boys' wellbeing 'with the spirit world. The rituals enabled these boys to feel 'like everyone else' and deepened their sense of acceptance. This, in turn, ameliorated degrees of guilt and shame over past misdeeds, and also represented a form of protection for community members who worried about what these boys might do once they came home. Numerous community members recalled the government-led sensitization campaigns organized 16 years earlier by Save the Children. They, too, helped to foster community acceptance and forgiveness.

These former child soldiers viewed other forms of assistance that supported normative life cycle milestones, such as employment, housing, farming and marriage, as helpful. Apprenticeships, income generation projects, seeds, and tools were also cited as positive forms of support. In contrast, education stipends (for fees, books and clothes) were not deemed to be helpful. They tended to cause tensions in several families because they singled out one child for support over the others. Also, most of these boys were not motivated to stay in school, but instead felt compelled to earn money, find a wife, and build a house. Understanding the normative life cycle, including key developmental milestones and how the social systems that support them have been affected (and may be assisted to become re-aligned), proved to be a pragmatic framework for assessing, designing and evaluating this child soldier reintegration program.

References

Amimo, O., Larson, D., Bittencourt, M. & Graham, D. (2003). The Potential for Financial Savings in Rural Mozambican Households. 25th International Conference of Agricultural Economists, Durban, South Africa, Ohio State University.

- Boothby, N. (1993). Care and Placement of Unaccompanied Children: Mozambique's Effort to Link Grassroots Networks of Volunteers to a National Program, *African Journal of Social Development*, University of Zimbabwe, July 1993:11-22.
- Boothby, N., Sultan, A. & Upton, P. (1991). *Children of Mozambique: The Cost of Survival.* United States Council for Refugees, Washington D.C.
- Bolton, P. & Tang, A. M. (2002). An Alternative Approach to Cross-Cultural Function Assessment. Social Psychiatry Social Epidemiology, 37, 537-543.
- Chicuecue, N. M. (1997). Reconciliation: The Role of Truth Commissions and Alternative Ways of Healing. *Development in Practice*, 7(4), 483-486.
- Hanlon, J. (1984). *Mozambique: The Revolution Under Fire*. London: Zed Books.
- Jensen, P. S. (1996). Practical Approaches to Research with Children in Violent Settings. In: R. J. Apfel, & B. Simon (Eds), Minefields in their Hearts: The Mental Health of Children in War and Communal Violence (206-217). New Haven: Yale University Press.
- Machel, G. (2001). *The Impact of War on Children*. London: Hurst and Company.
- Morgan, G. (1990). Violence in Mozambique: Towards an Understanding of Renamo. *The* Journal of Modern African Studies, 28(4), 603-619.
- Schafer, J. (2001). Guerrillas and Violence in the War in Mozambique: De-Socilization or Re-Socialization? African Affairs, 100, 215-237.
- UNHCR (1999). Refugees and others of concern to UNHCR-1999 Statistical Overview. Geneva: UNHCR.

- UNICEF (1987). Children in on the Front Line: The Impact of Apartheid, Destabilization and Welfare on Children in Southern and South Africa. New York: UNICEF.
- Vines, A. (1991). *Renamo: Terrorism in Mozambique*. London: Villiers Publications.
- World Food Program (2001). Visit of WFP Executive Board to Mozambique, June 2–9, 2001. http://www.wfp.org/eb/docs/2001/wfp006158~l.pdf
- World Health Organization (2000). Assessing Nutritional Status and Recovery of the Child with Serious Infection or Malnutrition. Bulletin of the World Health Organization. 72: 273-83. http://www.who.int/child-adolescent-health/publications/referral.care/referencepdf/01prelims.pdf

- ³ United Nations Security Resolutions, U. N. S. C. 1261, 1314, 1379 and 1460.
- ⁴ For the purposes of this study, we refer to a 'child soldier' as any child under the age of 18 years who was in Renamo base camps regardless of their particular role as porters, servants, or combatants.
- ⁵ The DTR Protocol was used to document over 25 000 separated children nationwide, including former child soldiers (Boothby, 1993).
- ⁶ Free listing exercise revealed that local population described as a state of existence very similar to post-traumatic stress syndrome (PTSD) that they called 'npfuka'. Much of the symptomology including nightmares, violent outbursts, and restlessness are the same; however, the etiology is quite

¹ www.child-soldiers.org downloaded 4/4/04

² The United Nations' General Assembly adopted an Optional Protocol to the Convention on the Rights of the Child establishing 18 as the minimum age for participation of children in conflict. The Rome Statues for the International Criminal Court, ILO and African Charter on the Rights and Welfare of the Child also have addressed the issue of children as soldiers.

different. One becomes infected or possessed by npfuka by killing another human being. The perpetrator of the violent act is thought to become possessed by the spirit of the person(s) killed and the physical manifestations are a result of the spirit's anger at being killed. To be freed from this condition, the perpetrator and his/her family must submit to traditional ceremonies that call on the spirit of the victim for forgiveness. The ceremonies are designed to calm the spirit and send it away, essentially exorcising it from the body of the killer. For the purposes of this chapter, the authors will use PTSD to describe this varied set of behaviors exhibited by the Lhanguene boys and described locally as npfuka.

⁷ Scoring for the TSCL scale followed the recommended procedures. Cronbach's alpha calculation was used to assess TSCL internal consistency and reliability. Bivariate analysis using independent sample *t*-tests was used for one-way analysis of variance for continuous variables that were measured. We used logistic regression analysis with the TSCL score as the dependent variable and the potential confounders of age at abduction and length of time spent with Renamo were entered in the model as control variables.

⁸ Children from Manica, Niassa, and Cabo Delgado were not included because Save the Children was not working in these provinces at the time.

 9 On the TSCL, the scores ranged from 32 to 77 with a mean score of 47 out of a possible range of 28 to 112 for 28 questions. Chronbach's alpha coefficient was 0.8849. Statistical significance for all tests, including logistic regression analyses, was set at $P\,{<}\,0.05$, and were two tailed without adjustment for multiple comparisons. Boys that spent less than 6 moths with Renamo scored between 32 and 40 on the TSCL while those that spent over

6 months scored between 42 and 77 with only 5 exceptions.

¹⁰ On a scale between 13 and 52 (13 being the best score and 52 being the worst score) respondents scored between 16 and 35. The mean score was 23.1597 and the alpha coefficient for reliability was .7185.

¹¹ The 1996 World Food Summit defined food security as, 'a situation in which all people at all times have physical and economic access to sufficient, safe, and nutritious food to meet their dietary needs and food preferences for an active and healthylife.' (As found in FAO Geneva Round Table on Food Security in the Context of the WTO Negotiations on Agriculture, 20 July 2001.) Rome. Discussion Paper No. 1.

While the government of Mozambique established the Lhanguene Center for political reasons, the intervention program's activities could have been implemented in rural communities. Decentralized approaches are generally more cost effective and are also capable of reaching larger numbers of affected individuals. Undertaking such efforts in the communities themselves also is conducive to maintaining supportive child-adult and peer-to-peer relationships for longer periods of time. The challenge in decentralized programming is the selection of caring adults and maintenance of quality training, supervision, and support.

Neil Boothby. Ph.D. is Professor of Clinical Population and Family Health and Director of the Program on Forced Migration and Health at the Mailman School of Public Health, Columbia University. He also has served in senior positions for UNHCR, UNICEF and Save the Children. email: nb2101@columbia.edu